Janes
Brown
Rt 1 Box 64
Evenston
52930

EMPLOYEE MEDICAL IDENTIFICATIO CARD

## Uinta County School District No. One

District No. One

EMPLOYEE 85.NO

JANICE M. BROWN 520-80-0798

Program 31 days/disability, Hosp

BENEFITS: Hospital: Room and Board—Semi Private, 31 days/disability, Hospi.
Extras: Reasonable and Customary, Out-Patient: R&C, Surgery: R&C DXL: \$300.
Supp. Accident: \$300. Maternity and Newborn: R&C, Major Medicat: \$50
Deductible, \$100-Femily Aggregate, Co-Insurance: 80% to \$2500 then 100% to \$1,000,000. Vision: Deductible bommon with Major Medical; Benefits per Schedule, Dental: No Deductible, Praventative 100% Restorative 50%, Major 50%, May/Cal/Yr \$1000, Ortho: \$0%, May/Lifetime \$1000. HOSPITAL UTILIZATION REVIEW: 1-800-835-2140

(See reverse side for claim handling instructions.)

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Conformery 12. Dick Woulton 1

## HEALTH MAINTENANCE PATIENT

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